

MAR 09 2011

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CITY CLERK'S OFFICE

NAME OF FILER	(LAST)	(FIRST)	(MIDDLE)
Plourde		John	Henry

1. Office, Agency, or Court

Agency Name

City of Lemoore

Division, Board, Department, District, if applicable

Your Position

City Council

Mayor Pro Tem

► If filing for multiple positions, list below or on an attachment.

Agency: Kings County Association of Governments

Position: Board (alternate)

2. Jurisdiction of Office (Check at least one box)

☐ State

☐ Judge (Statewide Jurisdiction)

☐ Multi-County _____

☒ County of Kings

☒ City of Lemoore

☐ Other _____

3. Type of Statement (Check at least one box)

☒ Annual: The period covered is January 1, 2010, through December 31, 2010.

☐ Leaving Office: Date Left ____/____/____
(Check one)

-or-
The period covered is ____/____/____, through December 31, 2010.

☐ The period covered is January 1, 2010, through the date of leaving office.

☐ Assuming Office: Date ____/____/____

☐ The period covered is ____/____/____, through the date of leaving office.

☐ Candidate: Election Year _____ Office sought, if different than Part 1: _____

4. Schedule Summary

Check applicable schedules or "None."

► Total number of pages including this cover page: 3

☐ Schedule A-1 - Investments - schedule attached

☐ Schedule C - Income, Loans, & Business Positions - schedule attached

☐ Schedule A-2 - Investments - schedule attached

☒ Schedule D - Income - Gifts - schedule attached

☐ Schedule B - Real Property - schedule attached

☐ Schedule E - Income - Gifts - Travel Payments - schedule attached

-or-

☐ None - No reportable interests on any schedule

herein and in any attached schedules is true and complete. I acknowledge this is
I certify under penalty of perjury under the laws of the State of California that

Date Signed

3/9/2011
(month, day, year)

Signature

SCHEDULE D Income – Gifts

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION Name John Henry Plourde

▶ NAME OF SOURCE <u>League of California Cities</u> ADDRESS (Business Address Acceptable) <u>1400 K Street, Suite 400, Sacramento, CA 95814</u> BUSINESS ACTIVITY, IF ANY, OF SOURCE <u>Policy Committee Member - See below comment</u> <table border="1"> <thead> <tr> <th>DATE (mm/dd/yy)</th> <th>VALUE</th> <th>DESCRIPTION OF GIFT(S)</th> </tr> </thead> <tbody> <tr> <td><u>1 / 21 / 10</u></td> <td>\$ <u>35</u></td> <td><u>Box Lunch</u></td> </tr> <tr> <td><u>4 / 8 / 10</u></td> <td>\$ <u>35</u></td> <td><u>Box Lunch</u></td> </tr> <tr> <td><u>6 / 17 / 10</u></td> <td>\$ <u>35</u></td> <td><u>Box Lunch</u></td> </tr> </tbody> </table>	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)	<u>1 / 21 / 10</u>	\$ <u>35</u>	<u>Box Lunch</u>	<u>4 / 8 / 10</u>	\$ <u>35</u>	<u>Box Lunch</u>	<u>6 / 17 / 10</u>	\$ <u>35</u>	<u>Box Lunch</u>	▶ NAME OF SOURCE ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF SOURCE <table border="1"> <thead> <tr> <th>DATE (mm/dd/yy)</th> <th>VALUE</th> <th>DESCRIPTION OF GIFT(S)</th> </tr> </thead> <tbody> <tr> <td><u> / / </u></td> <td>\$ <u> </u></td> <td><u> </u></td> </tr> <tr> <td><u> / / </u></td> <td>\$ <u> </u></td> <td><u> </u></td> </tr> <tr> <td><u> / / </u></td> <td>\$ <u> </u></td> <td><u> </u></td> </tr> </tbody> </table>	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)	<u> / / </u>	\$ <u> </u>	<u> </u>	<u> / / </u>	\$ <u> </u>	<u> </u>	<u> / / </u>	\$ <u> </u>	<u> </u>
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Comments: Transportation, Communications, and Public Works Policy Committee

FPPC Form 700 (2010/2011)

John Henry Plourde

Part 1 Addition

Agency: Kings County Area Public Transit Agency

Position: Board (Alternate)